

Substitute for form 1449A/B/PTO <h2 style="text-align: center; margin: 0;">INFORMATION DISCLOSURE STATEMENT BY APPLICANT</h2> <p style="text-align: center; margin: 5px 0;">(Use as many sheets as necessary)</p>				Complete if Known	
				Application Number	09/821,005
				Filing Date	March 29, 2001
				First Named Inventor	Michael D. Ellis
				Art Unit	2623
				Examiner Name	Justin E. Shepard
				Attorney Docket Number	UV-189
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Examiner Initials*	Cite No. ¹	Document Number	Publication Date	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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OTHER RELATED CASES					
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ALL REFERENCES CONSIDERED EXCEPT WHERE LINED THROUGH. /J.S./

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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹Applicant's unique citation designation number (optional). ²Applicant is to place a check mark here if English language Translation is attached.